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PETER N. PERRETTI, JR.
ATTORNEY GENERAL OF NEW JERSEY

By: Kathy Rohr
Deputy Attorney General
Division of Law, Room 316
1100 Raymond Boulevard
Newark, New Jersey 07102
Tel: (201) 648-4735

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
NEW JERSEY STATE BOARD OF DENTISTRY
DOCKET NO.

In the Matter of)	
STEVEN ISRAEL FRIED, D.D.S.)	Administrative Action
Licensed to Practice Dentistry)	CONSENT ORDER
in the State of New Jersey)	

This matter was opened to the State Board of Dentistry upon receipt of information from the Enforcement Bureau, Division of Consumer Affairs, Professional Boards, concerning allegations of inappropriate prescribing and medical disability. Dr. Fried denies the allegations in their entirety.

In order to resolve this matter without recourse to formal proceedings and for good cause shown;

IT IS ON THIS 12th DAY OF May, 1989,

HEREBY ORDERED AND AGREED THAT:

1. Dr. Fried shall successfully complete the mini-residency entitled "The Proper Prescribing of Controlled Dangerous

Substances" offered by Dr. William Vilensky and sponsored by the University of Medicine & Dentistry of New Jersey at the School of Osteopathic Medicine in Cherry Hill, New Jersey. Dr. Fried shall be required to complete both the didactic and the clinical portions of this course no later than December 31, 1989. Upon completion of the course, Dr. Fried shall present to the Board, in writing, a certificate of successful completion of the course signed by Dr. Vilensky.

2. Dr. Fried shall submit to urine monitoring under the supervision of the Impaired Dentists Program on a random, unannounced basis, and at a random frequency. Said monitoring shall continue for a period of one (1) year from the entry date of this Order, and shall not exceed fifteen (15) urine tests during such period, without just cause.

The urine monitoring shall be conducted with direct witnessing of the taking of the samples either from a volunteer or a drug clinic staff as arranged and designated by the Impaired Dentists Program. The initial drug screen will utilize the EMIT technique and all confirming tests and/or secondary tests will be performed by gas chromatography/mass spectrometry (G.C./M.S.). The Impaired Dentists Program shall be responsible to assure that all urine samples are handled by a laboratory competent to provide these services. All test results shall be provided in the first instance directly to the Impaired Dentists Program, and any positive result will be reported immediately by the Program

to William Gutman, Executive Director of the Board, or his designee in the event he is unavailable. The Board will retain sole discretion to modify the manner of testing in the event technical developments or individual requirements indicate that a different methodology or approach is required in order to guarantee the accuracy and reliability of the testing.

Any failure by Dr. Fried to submit or provide a urine sample within twenty-four (24) hours of a request will be deemed to be equivalent to a confirmed positive urine test. In the event Dr. Fried is unable to appear for a scheduled urine test or provide a urine sample due to illness or other impossibility, consent to waive that day's test must be secured from the Impaired Dentists Program.

Dr. Fried shall be responsible for all costs for urine monitoring.

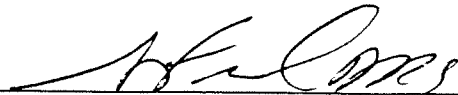
3. Dr. Fried shall submit to physical examinations at the discretion of the Board for a period of one (1) year. Dr. Fried shall submit the name of a physician to conduct such examinations for approval by the Board. In the event the Board does not approve the named physician, the Board shall appoint a physician to conduct such examinations. Dr. Fried shall cause the appointed physician to submit a preliminary report to the Board no later than thirty (30) days from the entry date of this Order. The report must contain a comprehensive description of Dr. Fried's general state of health as well as a statement indicating that in the opinion of the physician, Dr. Fried is not under any physical or medical disability that would prevent him from

discharging the functions of a dentist in a manner consistent with the public's health, safety and welfare. Dr. Fried shall be responsible for the fee of the physician for the examination and report.



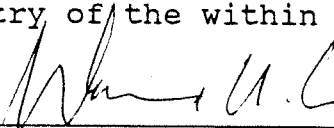
SAMUEL FURMAN, D.D.S.
PRESIDENT
STATE BOARD OF DENTISTRY

I have read the within Order. I understand the Order and I agree to be bound by its terms and conditions.



STEVEN ISRAEL FRIED, D.D.S.

I consent to the form and entry of the within Order.



DAVID A. CUTNER, ESQ.
Counsel for Dr. Fried